



Membership Application

Name:

(Please print)

Address: _____

DOB: ____ / ____ / ____

City/State: _____

Zip: _____

Home phone: _____ Work: _____

Cell: _____

Email: _____

Address: _____

Employer:

Membership \$300* _____

Spouse of Member \$250* _____

Corporate \$2500* Attach Corporate Agreement

* see reverse for membership descriptions

By signing this application I state that I am not prevented from possessing or coming into contact with firearms. That I agree to abide by all safety and club rules. I understand that membership details may change at the direction of the Club Manager.

Signature: _____

____ / ____ / ____

Date:

Safety Video Viewed: _____

DHSC Employee Verification: _____

Membership Categories

Regular Member

- Discounted pricing on clays, selected retail items, gun rentals, cart rental
- Free use of rifle and pistol range
- Guest Fee of \$5 per visit (limit 2 guests per visit, retail rates for additional guests)
- Invitation to members only events

Spouse of Member

- Discounted fee for spouse of member
- All benefits of Regular member

Corporate Member

- Two (2) designated memberships
- Corporate sponsor signage at designated location on course or range
- Waiver of guest fee (\$5) (limit 3 guests per designated member per visit)
- All benefits of Regular Member

Training Agencies

Firearm Instructors and related training agencies see Club Manger for details on range and facility rental.

*****Terms Subject to Change at Club Managers Discretion*****